1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # F9800002030

LASALLE HOTEL PROPERTIES, INC.

## FILED Mar 25, 1999 8:00 am **Secretary of State**

03-25-1999 90023 044 \*\*\*150.00

Mailing Address Principal Place of Business 220 EAST 42ND\_ST 220 EAST 42ND\_ST. NEW YORK NY 10017 NEW YORK NY 10017 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 04/09/1998 4. FEI Number Applied For 2. Principal Place of Business 2a. Mailing Address 36-4219376 APPLIED FOR Not Applicable 1401 Eye Street NW 1401 Eye Street NW \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certifcate of Status Desired Fee Required: ≂Sufte=900≈ -Suite-900-City & State City & State 6. Election Campaign Financing \$5.00 May Be Added to Fees Washington, DC Trust Fund Contribution Washington, DC 28 23 Country Zip 8. This corporation owes the current year Intangible Zip Country 20005 □No USA 20005 USA 30 Personal Property Tax. 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name 81 C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 83 Zip Code 84 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. ★ Change ☐ Addition ☐ DELETE 1.1 TITLE TITLE SCOTT, STUART L 1.2 NAME NAME 220 FAST 42ND ST. 200 East Randolph Drive 1.3 STREET ADDRESS STREET ADDRES Chicago, IL 60601 NEW YORK NY 10017 1.4 CITY-ST-ZIP CITY-ST-ZIP Addition **⊠** Change ☐ DELETE **PCEO** 2.1 TITLE TITLE BORTZ, JON E 2.2 NAME NAME 1401 Eye Street NW, Suite 900 220 EAST 42ND ST. 2.3 STREET ADDRESS STREET ADORES: Washington, DC 20005 NEW YORK NY 10017 2.4 CITY-ST-ZIP CITY-ST-ZIF Chief Operating Officer Change ☐ Addition DELETE 3.1 TITLE TITLE BARNELLO, MICHAEL D 3.2 NAME NAME 1401 Eye Street, NW, Suite 900 220 EAST 42ND ST. 3.3 STREET ADDRESS STREET ADDRESS Washington, DC 20005 NEW YORK NY 10017 3.4. CITY-ST-ZIP CITY-ST-ZIF X Addition ☐ Change ☐ DELETE 4.1 TITLE Chief Financial Officer TITLE Hans Weger 4 2 NAME NAME 1401 Eye Street NW, Suite 900 4.3 STREET ADDRESS STREET ADDRESS Washington, DC 20005 4.4 CITY-ST-ZIF CITY-ST-ZIP ☐ Change ☐ Addition ☐ DELETE 5.1 TITLE TITLE 52 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP Addition DELETE 6.1 TITLE ☐ Change TITLE 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee emplowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in ent with an address, with all other like empowered.

SIGNATURE:

Robert K. Hagan, Vice Presidnet SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/1/99

(312) 228-2050

Daytime Phone #

CR2E034 (11/98)